



GAU  
3301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

EXPRESS MAIL NO. EM368674397US

W3-17-98

Serial No.: 08/484,928  
Filing Date: June 7, 1995  
Applicant: Gary K. Michelson  
For: FRUSTO-CONICAL INTERBODY SPINAL FUSION IMPLANTS  
Examiner: Brown, M.  
Art Unit: 3301  
Atty's Docket No.: P-12509

#9 / neg. w/d  
of aband.

Assistant Commissioner for Patents  
Washington, D.C. 20231

RECEIVED

MAR 10 1998

Sir:

GROUP 3200

REQUEST TO WITHDRAW NOTICE OF ABANDONMENT

Enclosed is a copy of a Notice of Abandonment which we received for the above-identified application. Also enclosed is a copy of the following documents: (1) Transmittal Letter and Request for Extension of Time Under 37 C.F.R. § 1.136 and fee; (2) Check for Extension of Time and Information Disclosure Statement fees; (3) Reply to Office Action Under 37 C.F.R. § 1.111; (4) Supplemental Information Disclosure Statement, PTO Form 1449, copy of cited reference, and fee pursuant to 37 C.F.R. § 1.17(p); and (5) Date stamped postcard from the Patent Office acknowledging receipt of these documents which were filed on December 19, 1997.

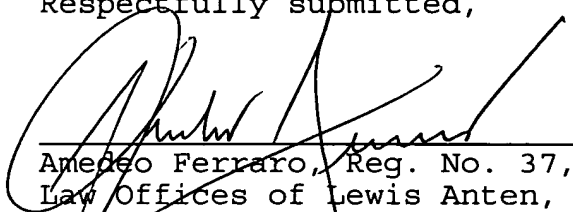
Because all of the above-mentioned papers and requisite

fees were filed within the six-month time period for response to the Office Action, Applicant's undersigned representative requests that the Notice of Abandonment be withdrawn.

If there are any other fees due in connection with the filing of this response, please charge our Deposit Account No. 01-2138. If a fee is required for an extension of time under 37 C.F.R. § 1.136 not accounted for in the papers accompanying this response, such an extension is requested and the fee should also be charged to our Deposit Account.

Respectfully submitted,

Dated: 2-26-98



Amedeo Ferraro, Reg. No. 37,129  
Law Offices of Lewis Anten, P.C.  
Attorneys for Applicant  
15830 Ventura Boulevard  
Suite 411  
Encino, California 91436  
Voice: (818) 501-3535  
Fax: (818) 501-3618



✓  
RECEIVED

JAN - 5 1998

LEWIS ANTEN  
A PROFESSIONAL CORPORATION

**MAIL DIVISION:**

The stamp of the United States Patent and Trademark Office will acknowledge receipt of the following:

Document: Transmittal Letter (in triplicate); Reply to  
Office Action; Information and Disclosure  
Statement; Form PTO 1449 and Cited Reference

Title of Invention: FRUSTO- CONICAL INTERBODY SPINAL FUSION IMPLANTS

Inventor: Gary K. Michelson

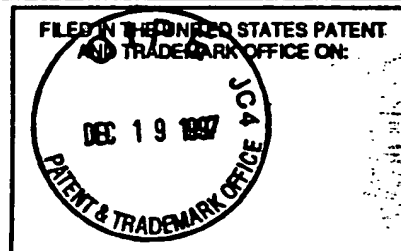
File: P-12509 Check Encl. Yes

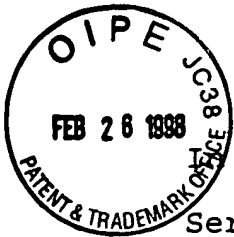
SN/ISS No. 08/484,928

Mailed: December 19, 1997

Sent Via:

COM EXP XX No. EM368674088US



Atty's Docket No. P-12509

EXPRESS MAIL NO. EM368674088US

re application of: Gary K. Michelson

Serial No.: 08/484,928

Filing Date: June 7, 1995

For: FRUSTO-CONICAL INTERBODY SPINAL FUSION  
IMPLANTSAssistant Commissioner for Patents  
Washington, D.C. 20231

RECEIVED

MAR 10 1998

Dear Sir:

Transmitted herewith is an Amendment in the above-  
identified application. **GROUP 3200**XXX Applicant requests a three-month extension of time under  
37 C.F.R. § 1.136.XXX A Supplemental Information Disclosure Statement, PTO Form  
1449, and copy of cited reference, and fee pursuant to 37  
C.F.R. § 1.17(p).

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	167	MINUS	167	= 0
INDEP.	8	MINUS	8	= 0
___ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
RATE	ADD'L FEE		RATE	ADD'L FEE
x 11 =	\$ 0	OR	x 22 =	\$ 0
x 41 =	\$ 0	OR	x 82 =	\$ 0
+ 135 =	\$ 0	OR	+ 270 =	\$ 0
ADDITIONAL FEE TOTAL		OR	TOTAL	
\$ 0			\$ 0	

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

\_\_\_ A check in the amount of \$\_\_\_ is attached to cover the  
fee for the attached amendment.

XX

A check in the amount of \$1,190.00 is attached to cover the \$950.00 fee for the three-month extension of time and the \$240.00 fee for the Information Disclosure Statement.

XX

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 01-2138 under the name of Lewis Anten, a professional corporation. Two duplicate copies of this sheet are attached.

X

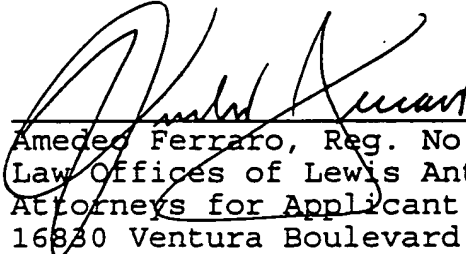
Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.

X

Any patent application processing fees under 37 C.F.R. § 1.17.

12-19-97

Date

  
Amedeo Ferraro, Reg. No. 37,129  
Law Offices of Lewis Anten, P.C.  
Attorneys for Applicant  
16830 Ventura Boulevard  
Suite 411  
Encino, California 91436  
Voice: (818) 501-3535  
Fax: (818) 501-3618